•-									Application or Docket Number					
	PATENT		12723478											
CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY OTHER THAN TYPE OR SMALL ENTIT						
TOTAL CLAIMS			10		·		.	PATE FEE		FEE	1	RATE	FEE	
FOR			NUMBER FILED .		NUM	NUMBER EXTRA		BASIC F	EE 3	85.00	OR	BASIC FEE	770.00	
TOTAL CHARGEABLE CLAIMS			フ 🖟 minus 20=		• 58			X\$ 9=			OR	X\$18=	1044	
INDEPENDENT CLAIMS			(minus 3 =		9			X43=			OR	X86=		
MŁ	JLTIPLE DEPEI	NDENT CLAIM P	RESENT		•						OR	+290=	280	
* If the difference in column 1 is less than zero, enter "0" in column 2						ı	TOTAL			OR	TOTAL	2104		
	CLAIMS AS AMENDED - PART II										,	OTHER		
	27704	(Calumn 1)	····	(Column 2) (Column			SMAL		L EN1	TITY	OR	SMALL		
AMENDMENTA		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUME PREVIO PAID F	BER	PRESENT EXTRA		RATE	TIC	DDI- DNAL EE		RATE	ADDI- TIONAL FEE	
NON NON	Total	. 42	Minus	- 78		= ^		X\$ 9=			OR	X\$18=		
AME	Independent	. 3	Minus	*** <i>}</i>		-/	Ī	X43=			OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						ſ	+145=	1		OR	+290=		
								TOTA			OR	TOTAL ADDIT, FEE		
3	-1600	_	OUII. FC	-										
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIO PAID F	ER USLY	PRESENT EXTRA		RATE	TIO	DI- NAL EE		RATE	ADDI- TIONAL FEE	
	Total	. 40	Minus	· ?	18	• —		X\$ 9=	İ		ОЯ	X\$18=		
	Independent	• 3	Minus	THE C	3			X43=			OR	X86=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						Γ	+145=	T		OR	+290=		
							L	TOTA		-	OR .	TOTAL		
		(Column 1)		(Colum	n 91	(Column 3)	A	DOIT. FEI	:		,	VDDIT. FEEL	,	
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOU PAID F	ST ER USLY	PRESENT EXTRA		RATE		DI- NAL		RATE	ADDI- TIONAL FEE	
Ş	Total	•	Minus	**		- .		X\$ 9=			OR	X\$18=		
ME	Independent	•	Minus	STAIN .		8		X43=	1		OR	X86=		
_	FIRST PRESE	NTATION OF MU	LTIPLE DEP	ENDENT	CLAIM		` -		╁╴	\neg				
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.											OR [+290=		
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ADDIT. FEE OR ADDIT. FEE ORDIT. FEE														
		ber Previously Paid					toun	d in the a	ppropris	ate box	in colu	van 1.		